Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

		Lilect		乚								
		CLAIMS AS				(Caluma 2)		LEI	NTITY		OTHER	
TOTAL CLAIMS			(Columni	(Column 1)		(Column 2)				OR I		
			7	7			RAT		FEE	4 /	RATE	FEE
FC			NUMBER	NUMBER FILED		NUMBER EXTRA		FEE	385.00	OR	BASIC FEE	770.00
TC	OTAL CHARGEA	ABLE CLAIMS	7 mir	7 minus 20=		* 7		9=		OR	X\$18=	
INE	DEPENDENT CI	LAIMS	3 mi	3 minus 3 = *		7		3=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT	RESENT			+145	5=		OR	+290=	
* If	the difference	in column 1 is	less than ze	less than zero, enter "0" in column 2				AL	385	OR	TOTAL	
	С	LAIMS AS A	MENDEC	MENDED - PART II							OTHER	
		(Column 1)		(Colum		(Column 3)	SMA	LL t	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$ 9	)= ]		OR	X\$18=	Θ
<b>IME</b>	Independent	*	Minus	***		=	X43	=		OR	X86=	
_	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		+145	=		OR	+290=	
TOTAL											TOTAL	
		(O ! 4)		(O-lum		(2 + 0)	ADDIT. F			OR ,	ADDIT. FEE	
		(Column 1) CLAIMS	Т	(Colum		(Column 3)	l		1001	, ,		1001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
<b>JME</b>	Independent	* '	Minus	***		=	X43=	= 1		OR	X86=	
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		1 1/1/15	寸			+290=	
			:				+145			OR	+290= TOTAL	•
			•	,	•		ADDIT. F			OR ,	ADDIT, FEE	
- 7		(Column 1)	, .	(Colum		(Column 3)	·			•		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	-	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	!	= .	X\$ 9=	_		OR	X\$18=	
AME.	Independent	<u></u>	Minus	***		=	X43=	7		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		_ j		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR [	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL ADDIT. FEE	
		nber Previously Paid					r found in the	appr	ropriate box	in colu	umn 1.	